

PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE
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00959
LAHIVE & COCKFIELD, LLP
One Post Office Square
Boston, Massachusetts 02109-2127

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	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/540,228	06/21/2005	Ernest LOUMAYE	KZY-001US	1620
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TITLE OF INVENTION: USE OF GNRH AGONISTS TO SUPPORT THE LUTEAL PHASE DURING INFERTILITY TREATMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
Non-Provisional	yes	\$755.00	\$300.00	\$1,055.00	02/05/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
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A. A. Mohamed	1654	
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- | | |
|---|---|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached.
Use of a Customer Number is required. | 2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |
| | 1 <u>Lahive & Cockfield, LLP</u>
2 <u>Debra J. Milasincic, Esq.</u>
3 <u> </u> |

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

PregLem S.A.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Geneva, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Issue Fee | <input type="checkbox"/> A check in the amount of the fee(s) is enclosed. |
| <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. |
| <input checked="" type="checkbox"/> Advance Order # of Copies <u>2</u> | <input checked="" type="checkbox"/> The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number <u>12-0080</u> . |

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5. Change in Entity Status (from status indicated above)

- | | |
|--|---|
| <input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. | <input type="checkbox"/> b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). |
|--|---|

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature	/Debra J. Milasincic, Esq./	Date
Typed or printed name	Debra J. Milasincic, Esq.	January 11, 2010
		Registration No.
		46,931

Application No. (if known): 10/540,228

Attorney Docket No.: KZY-001US

Certificate of Electronic Filing Under 37 CFR 1.8

I hereby certify that this correspondence is being transmitted via the Office electronic filing system in accordance with 37 CFR 1.6(a)(4):

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on January 11, 2010
Date

/Debra J. Milasincic, Esq./

Signature

Debra J. Milasincic, Esq.

Typed or printed name of person signing Certificate

46,931
Registration Number, if applicable

(617) 994-0781
Telephone Number

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Issue Fee Transmittal (1 page)